

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
PROLOGIC INC PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		8603.89
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	10427.53									
(c) Total Receipts (from Line 19)	1599.66	9423.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	12027.19	18027.19								
7. Total Disbursements (from Line 31)	4000.00	10000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8027.19	8027.19								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
PROLOGIC INC PAC

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	1366.66	6708.30
(i) Itemized (use Schedule A)		
(ii) Unitemized	233.00	2715.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1599.66	9423.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	1599.66	9423.30
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	1599.66	9423.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1599.66	9423.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	10000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4000.00	10000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	10000.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	1599.66	9423.30
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1599.66	9423.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A.	Full Name (Last, First, Middle Initial) Mr. ROBERT COWLING	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 112 COLLEEN CT NE	Transaction ID: SA11AI.6420
	City State Zip Code LEESBURG VA 20176	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

B.	Full Name (Last, First, Middle Initial) Mr. ROBERT COWLING	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 112 COLLEEN CT NE	Transaction ID: SA11AI.6464
	City State Zip Code LEESBURG VA 20176	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Mr. CHETAN DESAI	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 2042 PINECREST DRIVE	Transaction ID: SA11AI.6422
	City State Zip Code MORGANTOWN WV 26505	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. LEAD ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A.	Full Name (Last, First, Middle Initial) Mr. CHETAN DESAI	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 2042 PINECREST DRIVE	Transaction ID: SA11AI.6458
	City State Zip Code MORGANTOWN WV 26505	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. LEAD ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. DANIEL GORDON	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 12734 KNIGHTS BRIDGE DRIVE	Transaction ID: SA11AI.6426
	City State Zip Code WOODBIDGE VA 22192	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. PRESIDENT, COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

C.	Full Name (Last, First, Middle Initial) Mr. DANIEL GORDON	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 12734 KNIGHTS BRIDGE DRIVE	Transaction ID: SA11AI.6462
	City State Zip Code WOODBIDGE VA 22192	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. PRESIDENT, COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A.	Full Name (Last, First, Middle Initial) ANGELA HAWKINS	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 363 EUSTACE ROAD	Transaction ID: SA11AI.6428
	City State Zip Code STAFFORD VA 22554	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC INC. CORPORATE SECURITY OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

B.	Full Name (Last, First, Middle Initial) ANGELA HAWKINS	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 363 EUSTACE ROAD	Transaction ID: SA11AI.6459
	City State Zip Code STAFFORD VA 22554	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC INC. CORPORATE SECURITY OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) AUDIE HITTLE	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 15 OLD HICKORY ROAD	Transaction ID: SA11AI.6429
	City State Zip Code TYNGSBORO MA 01879	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A.	Full Name (Last, First, Middle Initial) AUDIE HITTLE	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 15 OLD HICKORY ROAD	Transaction ID: SA11AI.6450
	City State Zip Code TYNGSBORO MA 01879	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. VICE PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Mr. PAUL MAGUIRE	Date of Receipt MM / DD / YYYY 05 / 09 / 2008
	Mailing Address 11875 FALLING CREEK DRIVE	Transaction ID: SA11AI.6432
	City State Zip Code MANASSAS VA 20112	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. VP, BUSINESS DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1200.00	

C.	Full Name (Last, First, Middle Initial) Mr. PAUL MAGUIRE	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 11875 FALLING CREEK DRIVE	Transaction ID: SA11AI.6461
	City State Zip Code MANASSAS VA 20112	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	semi monthly payroll
	Name of Employer Occupation PROLOGIC, INC. VP, BUSINESS DEVELOPMENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1225.00	

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A.	Full Name (Last, First, Middle Initial) DANIEL MCCAUGHERTY		Date of Receipt
	Mailing Address 30 WEXFORD WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	City	State	Zip Code
	BRIDGEPORT	WV	26330
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.6433
		Amount of Each Receipt this Period	
		<input type="text"/> 50.00	
Name of Employer PROLOGIC, INC.		Occupation VP	semi monthly payroll
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 450.00	

B.	Full Name (Last, First, Middle Initial) DANIEL MCCAUGHERTY		Date of Receipt
	Mailing Address 30 WEXFORD WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 2 3 / 2 0 0 8
	City	State	Zip Code
	BRIDGEPORT	WV	26330
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.6449
		Amount of Each Receipt this Period	
		<input type="text"/> 50.00	
Name of Employer PROLOGIC, INC.		Occupation VP	semi monthly payroll
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 500.00	

C.	Full Name (Last, First, Middle Initial) CHARLES PORTER		Date of Receipt
	Mailing Address 8031 GREAT RUN LAKE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 9 / 2 0 0 8
	City	State	Zip Code
	WARRENTON	VA	20186
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.6436
		Amount of Each Receipt this Period	
		<input type="text"/> 50.00	
Name of Employer PROLOGIC, INC.		Occupation VICE PRESIDENT, BIDS/PROPOSALS	semi monthly payroll
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text"/> 450.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 12
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
CHARLES PORTER

Mailing Address 8031 GREAT RUN LAKE

City WARRENTON State VA Zip Code 20186

FEC ID number of contributing federal political committee. **C**

Name of Employer PROLOGIC, INC. Occupation VICE PRESIDENT, BIDS/PROPOSALS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 23 / 2008

Transaction ID: SA11AI.6460

Amount of Each Receipt this Period 50.00

semi monthly payroll

B. Full Name (Last, First, Middle Initial)
GREG THOM

Mailing Address 309 RILEY STREET

City FALLS CHURCH State VA Zip Code 22046

FEC ID number of contributing federal political committee. **C**

Name of Employer PROLOGIC, INC. Occupation SPECIAL PROJECTS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1874.97

Date of Receipt 05 / 09 / 2008

Transaction ID: SA11AI.6440

Amount of Each Receipt this Period 208.33

semi monthly payroll

C. Full Name (Last, First, Middle Initial)
GREG THOM

Mailing Address 309 RILEY STREET

City FALLS CHURCH State VA Zip Code 22046

FEC ID number of contributing federal political committee. **C**

Name of Employer PROLOGIC, INC. Occupation SPECIAL PROJECTS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2083.30

Date of Receipt 05 / 23 / 2008

Transaction ID: SA11AI.6451

Amount of Each Receipt this Period 208.33

semi monthly payroll

SUBTOTAL of Receipts This Page (optional)	466.66
TOTAL This Period (last page this line number only)	1366.66

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PROLOGIC INC PAC

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR ALTMIRE

Mailing Address P.O. Box 1776

City Freedom State PA Zip Code 15042

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: PA District: 04

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6470
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
PATRICK MURPHY FOR CONGRESS

Mailing Address PO BOX 868

City LEVITTOWN State PA Zip Code 19058

Purpose of Disbursement Contribution
Candidate Name

Office Sought: House Senate President
State: PA District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6466
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)